

## PLACE OF BIRTH

1. County of Pima

District of \_\_\_\_\_

Town of Maricopa

or \_\_\_\_\_

City of \_\_\_\_\_

## ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF BIRTHState Index No. 122County Registrar No. 558

Local Registrar No. \_\_\_\_\_

No. \_\_\_\_\_ St. \_\_\_\_\_ Ward \_\_\_\_\_  
(If birth occurred in a hospital or institution, give its NAME instead of street and number)2. Full name of child Charles Leonard Hubbs If child is not yet named, make supplemental report, as directed.3. Sex of Child MaleTo be answered ONLY  
in event of plural  
births.

4. Twin, triplet or other \_\_\_\_\_

6. Legitimate? Yes7. Date of birth Sept 6 1928

Month day year

8. FATHER

Full name Leonard G Hubbs9. Residence (Usual place of abode) Maricopa

If nonresident, give place and state \_\_\_\_\_

10. Color or race White11. Age at last birthday 34 (Years)12. Birthplace (city or place) California

(State or country) \_\_\_\_\_

13. Occupation \_\_\_\_\_

Nature of industry Mining Engineer

14. MOTHER

Full name Augusta May Way15. Residence (Usual place of abode) Maricopa

If nonresident, give place and state \_\_\_\_\_

16. Color or race White17. Age at last birthday 21 (Years)18. Birthplace (city or place) Montana

(State or country) \_\_\_\_\_

19. Occupation \_\_\_\_\_

Nature of industry Housewife20. Number of children of this mother (a) Born alive and now living 2

(b) Born alive but now dead \_\_\_\_\_

(c) Stillborn \_\_\_\_\_

21. Were precautions taken against thalnia neonatorum? Yes

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was (Born alive or stillborn) \_\_\_\_\_ at \_\_\_\_\_ m. on the date above stated.

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidences of life after birth.

Given name added from \_\_\_\_\_

a supplemental report \_\_\_\_\_

Month, day, year. \_\_\_\_\_

Registrar. \_\_\_\_\_

Filed \_\_\_\_\_ 19 \_\_\_\_\_

Filed Jan 10 1928

Local Registrar. \_\_\_\_\_

County Registrar. \_\_\_\_\_

382-906-168